

114.5 CMR 14.00: Administration of Grants to Certain Community Health Centers

Sections

- 14.01: General Provisions
- 14.02: Definitions
- 14.03: Minimum Application Criteria
- 14.04: Application Procedure
- 14.05: Application Materials
- 14.06: Duty to Supplement Application
- 14.07: Criteria for Awarding Grants
- 14.08: Review and Selection Procedure
- 14.09: Post-Award Reporting Requirements
- 14.10: Severability

14.01 General Provisions

- (1) Scope, Purpose, and Effective Date. 114.5 CMR 14.00 governs the administration of one-time grants for community health centers totaling \$6.5 million, authorized by Chapter 300 of the Acts of 2002. 114.5 CMR 14.00 is effective June 3, 2003.
- (2) Authority. 114.5 CMR 14.00 is adopted pursuant to St. 2002, c.300, s.43.

14.02 Definitions

As used in 114.5 CMR 14.00, unless the context requires otherwise, the following terms have the following meanings.

Commissioner. The Commissioner of the Division of Health Care Finance and Policy or designee.

Community Health Center. A Freestanding Community Health Center or a Hospital-Licensed Community Health Center.

Division. The Division of Health Care Finance and Policy established under M.G.L. C.118G.

Freestanding Community Health Center. A federally-qualified health center operating in conformance with federal rules for community health centers under 42 USC s.254c, currently participating in the Massachusetts Medicaid program and uncompensated care pool, or a community health center with an active provider agreement with the Division of Medical Assistance under 130 CMR 405.000 and currently participating in the uncompensated care pool.

Hospital-Licensed Community Health Center. A hospital clinic operating in conformance with federal rules for community health centers under 42 USC s. 254c, and currently participating in the uncompensated care pool, or a hospital-licensed community based

satellite site which provides comprehensive primary care services including adult/internal medicine, pediatrics, obstetrics plus ancillary services including social services, case management, and nutritional counseling, has an established and independent community board or advisory committee, specific to the community health center of which at least 51% are consumers, is certified by the Division of Medical Assistance under 130 CMR 410.404 and currently participating in the uncompensated care pool. (Note: Pediatrics and Obstetrics may be provided through formal contractual relationships.)

Medicaid. The Massachusetts Medicaid program administered by the Division of Medical Assistance.

Uncompensated Care Pool. The Uncompensated Care Pool established pursuant to M.G.L. c.118G, s.18.

14.03: Minimum Application Criteria:

Only entities that meet all of the criteria set forth in 114.5 CMR 14.03 may apply. The Division will not review applications that do not meet these minimum criteria.

- (1) All applicants must be either a Freestanding Community Health Center or a Hospital-Licensed Community Health Center.
- (2) All applicants must be able to demonstrate financial need as a result of changes to G.L. c.118E s.9A, enacted according to the changes to the Acts of 2002, c.184, s.95.
- (3) All applicants who received grants under any prior grant program under 114.5 CMR 8.00, 9.00 and 10.00 must be in full compliance with all terms of the grant award including reporting requirements specified in previous contracts.
- (4) All applicants must demonstrate satisfactory compliance process with the Uncompensated Care Pool eligibility and reporting requirements.
- (5) All applicants must be in compliance with cost reporting requirements of 114.3 CMR 4.00.

14.04: Application Procedure

The Division must receive 1 paper copy plus one copy on disk of any electronic versions as required in 114.5 CMR 14.05 **by 5:00pm on June 10, 2003.** Application materials submitted by e-mail must be acknowledged by the recipient in order to be considered complete. The Division will not consider applications received after that date and time. Applications must be submitted to the Division's offices at 2 Boylston Street, 5th Floor, Boston, MA 02116, Attention: Hallie Torrell. E-mail submissions can be sent to Hallie.Torrell@state.ma.us.

14.05: Application Materials

All Applicants must submit the materials required below.

- (1) Description of how the applicant meets the minimum application criteria specified in 114.5 CMR 14.03.
- (2) Completed form DHCFP CHC-03GRANT, submitted in hard copy and electronic in Excel version 4.0 or higher.
- (3) All contract forms required by the Office of the Comptroller in preparation for possible execution of a contract. Authorized signatory must be available to execute the contract from June 16 —June 27, 2003.

14.06: Duty to Supplement Application

Applicants shall report any relevant changes in circumstances, including but not limited to changes in funding need, that occur after the applicant is submitted.

14.07: Criteria for Awarding Grants

The Division will evaluate all applications using the funding preferences in 114.5 CMR14.07.

- (1) Funding will be determined based on the applicant's proportion of eligible adult medically necessary visits or services compared to the total of all eligible adult medically necessary visits or services provided to patients who no longer receive MassHealth coverage due to the changes in G.L. c.118E s.9A, enacted according to the changes to the Acts of 2002, c.184, s.95, effective April 1, 2003.
- (2) Funding will be applied toward health services provided on or after July 1, 2003 in eligible sites of care that have not been claimed for Uncompensated Care Pool payment and are not billable to the Division of Medical Assistance or other payer.

14.08: Review and Selection Procedure

- (1) The Division will review the applications in accordance with the award criteria in 114.5 CMR 14.07. Applications that do not meet all the minimum application criteria in 114.5 CMR14.03 and have not submitted all required materials in 114.5 CMR14.05 will not be further reviewed and will not be approved for funding.
- (2) The Division may request an Applicant to submit any additional information it deems necessary to complete its review, including an oral presentation. The Division must receive all requested additional materials within five (5) business days of the request in order for the Division to consider the additional materials.
- (3) The Division will recommend to the Commissioner Applicants to receive grants, the amounts to be awarded, and any additional steps the Applicants must take in order to demonstrate eligibility.
- (4) Awards will be made based on the availability of funds, the degree to which an Applicant meets the criteria in 114.5 CMR 14.07, and the degree to which the grant meets the Applicant's need for such funding. The total amount of the grants awarded will be \$6.5 million.
- (5) The Commissioner will make the final award decisions, which are final and not subject to appeal.
- (6) The Division will notify all Applicants of their selection or non-selection for a grant.

- (7) All Applicants selected to receive a grant must execute contracts with the Division, as required by 815 CMR 2.05, in order to receive payment.

14.9: Post-Award Reporting Requirements

Post-award reporting will be included in the contracts for grantees. Such reporting may articulate deadlines for reports and use of awarded funds. The Division may require the return of unused or undocumented funds.

14.10: Severability

The provisions of 114.5 CMR14.00 are severable. If any provisions or the application of any provision to any Community Health Center or circumstances is held invalid or unconstitutional, and such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 114.5 CMR14.00 or the application of such provisions to Community Health Centers or circumstances other than those held invalid.

REGULATORY AUTHORITY 114.5 CMR 14.00 St.2002, c.300, s.43.